DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CS (SEMIAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Corrected

Facility Information

Facility Name: HIDDEN TERRACE (0009379)

Address: 3405 W SYCAMORE, FRANKLIN, WI 53132

License Status: REGULAR

Licensed/Certified/Registered 02/01/2002

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095940 End Date: 10/24/2005 Type: STANDARD Purpose: SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009481 Served 11/23/2005

Deficiencies Cited Subject Area Compliance

Verified

83.21(4)(o) MEDICATIONS

83.33(3)(b)2.d MEDICATION STORAGE SHALL BE LOCKED 83.33(3)(e)5 MEDICAL RECORD DOCUMENTATION

Survey ID: 0092702 End Date: 05/27/2004 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 11/21/2005 SOD #10009481 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION COMPLY WITH REQUIREMENT FORFEITURE---83.21(4)(o)

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Complaint History

Date Complaint Received: 06/18/2003 Date Investigation Completed: 05/27/2004

Subject Area(s) Result SOD #

RESIDENT BEHAVIOR/FACILITY PRACTICE ADMINISTRATION

NOT SUBSTANTIATED NOT SUBSTANTIATED

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